

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: David Jonathan Madge et al.

Application No.: 10/658,971

Filed: September 9, 2003

Confirmation No.: 3998

For: BORONIC ACID SALTS USEFUL IN  
PARENTERAL FORMULATIONS

Examiner: To be assigned

Art Unit: 1615

Attorney Reference No.: 6613-66749-01

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: MAIL STOP AMENDMENT, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Attorney  
for Applicant(s) Wayne W. RupertDate Mailed September 15, 2005

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TRANSMITTAL LETTER

Enclosed for filing in the application referenced above are the following:

- Supplemental Information Disclosure Statement
- PTO-1449 Form and copies of Non-U.S. Reference listed therein
- The Director is hereby authorized to charge any additional fees that may be required, or credit over-payment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

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Attorney or Agent for Applicant(s) Mayra L. Bryant

Date Mailed September 15, 2005

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT  
PURSUANT TO 37 C.F.R. § 1.97(b)(3)**

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Listed on the accompanying form PTO-1449 and enclosed herewith are several English-language documents. Applicants respectfully request that these documents be listed as references cited on the issued patent.

Applicants direct the U.S. Patent and Trademark Office's attention to the fact that an Office action containing certain rejections was mailed on June 15, 2005, in related Application Serial No. 10/659,179, filed on September 9, 2003. Attached is a copy of the Office action.

Applicants filed this Information Disclosure Statement ("IDS") before the mailing date of a first Office action on the merits. As a result, no fee should be required to file this IDS. However, if the Patent Office determines that a fee is required for Applicants to file this IDS, please charge any such fees, or credit overpayment, to Deposit Account No. 02-4550. A duplicate copy of this Information Disclosure Statement is enclosed.

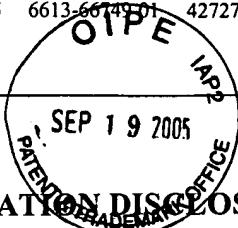
The filing of this IDS shall not be construed to be an admission that the information cited in the statement is, or is considered to be, prior art or otherwise material to patentability as defined in 37 C.F.R. §1.56.

Respectfully submitted,

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**INFORMATION DISCLOSURE STATEMENT  
BY APPLICANT**

|                        |                      |
|------------------------|----------------------|
| Attorney Docket Number | 6613-66749-01        |
| Application Number     | 10/658,971           |
| Filing Date            | September 9, 2003    |
| First Named Inventor   | David Jonathan Madge |
| Art Unit               | 1615                 |
| Examiner Name          | To be assigned       |

**U.S. PATENT DOCUMENTS**

| Examiner's Initials* | Cite No. (optional) | Number    | Publication Date | Name of Applicant or Patentee |
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|                      |                     |           |                  |                               |

**FOREIGN PATENT DOCUMENTS**

| Examiner's Initials* | Cite No. (optional) | Country  | Number       | Publication Date | Name of Applicant or Patentee           |
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|                      |                     | WIPO/PCT | WO 94/21668  | 29 Sept 1994     | The DuPont Merck Pharmaceutical Company |
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|                      |                     |          |              |                  |   |
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| <b>INFORMATION DISCLOSURE STATEMENT<br/>BY APPLICANT</b> |                     | Attorney Docket Number  | 6613-66749-01        |
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|  |                     | Filing Date   | September 9, 2003    |
|  |                     | First Named Inventor  | David Jonathan Madge |
|  |                     | Art Unit  | 1615                 |
|  |                     | Examiner Name   | To be assigned       |
| Examiner's Initials*                                     | Cite No. (optional) | <b>OTHER DOCUMENTS</b>  |                      |
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